

DEPARTMENT OF THE NAVY
NAVAL AIR STATION, WHIDBEY ISLAND
OAK HARBOR, WASHINGTON 98278-5000

NASWHIDBEYINST 5355.4
N01D:Hr
29 Jul 1997

NASWHIDBEY INSTRUCTION 5355.4

Subj: NAVY DRUG AND ALCOHOL ADVISORY COUNCIL (NDAAC)

Ref: (a) CINCPACFLT/CINCLANTFLTINST 5350.1
(b) OPNAVINST 5350.4B
(c) NAVBASESEAINST 5355.1J

Encl: (1) Quarterly Data Reporting Responsibilities

1. Purpose. To delineate responsibilities of the Navy Drug and Alcohol Advisory Council (NDAAC) for the Island County area; to designate representatives to the Council; and to outline the Council's reporting requirements.

2. Background. References (a), (b) and (c) direct establishment of local NDAACs to provide threat assessments for review by the regional NDAAC. Reference (c) designates Commanding Officer, Naval Air Station Whidbey Island, as the Local Coordinator for Island County. Illicit drug and alcohol abuse pose a profound danger to each command's good order, discipline and morale. It tears away at the core of our readiness posture and poses an inherent threat to the safety and well being of our operating and shore establishment. Drug and alcohol abuse reduces the operational capability of the command and results in loss of man hours, investigations, and legal/disciplinary matters. All hands must discourage all practices which glamorize or encourage drug/alcohol abuse and pursue innovative and aggressive programs in its place.

3. Policy. The Commanding Officer has a policy of zero tolerance for drug and alcohol abuse within his geographical area. All personnel are directed to deal firmly in all cases of drug/alcohol abuse. They shall take steps to process personnel for discharge, if appropriate, and to enroll others into existing programs designed to educate them about the dangers of abuse. Council members must devise programs designed to detect, deter, discipline, assess, train, educate, and counsel offenders. Personnel whose abuse of alcohol causes them to be late for duty, who appear for duty with a hangover, who exhibit alcohol related attitude problems or who are involved in alcohol related liberty incidents shall be identified and given all possible assistance to participate in remedial programs on a case by case basis. When personnel fail to progress, make appropriate recommendations for transfer or separation. In particular, commanding officers

and officers in charge are to ensure personnel with drug/alcohol abuse problems are removed from positions and situations that involve handling classified material, sensitive equipment, and dangerous machinery. The potential relationship between drug/alcohol abuse, security compromise, and accidents must be clear in everyone's minds.

4. Council Membership. The Navy Drug and Alcohol Advisory Council shall consist of the following members:

Executive Officer, Naval Air Station (Chairperson)	Commanding Officer, Naval Air Station
Commanding Officer, Naval Hospital Oak Harbor	Head, Mental Health Department, Naval Hospital Oak Harbor
NAS Religious Ministry Department Head	NAS Staff Judge Advocate
NCIS, Special Agent in Charge	NAS Security Officer
Division Officer, Alcohol Treatment Program	Director, Family Service Center
Manager, Family Advocacy Program	NAS Command Urinalysis Coordinator
Navy Exchange Officer	Alcohol Rehabilitation Department, Bremerton, Staff Representative
Director, Morale, Welfare and Recreation Department	Local Law Enforcement Agencies

5. Meetings. The council will meet quarterly at the direction of the chairperson. The information contained in enclosure (1) will be discussed at each quarterly meeting.

6. Responsibility. The council is responsible for:

a. Analyzing the nature, extent and effect of the local substance abuse threat.

b. Liaison with local law enforcement activities in developing threat assessments.

c. Determining level of drug and alcohol education programs available to local commands.

d. Review of facilities and methods available to combat drug and alcohol abuse.

e. Evaluate training of prevention personnel and success of urinalysis testing program.

7. Report. The Local Coordinator shall submit a copy of the quarterly NDAAC minutes to NAVBASE Seattle (N61) to be received by the 22nd day of February, May, August, and November. Minutes shall include at a minimum:

a. Threat assessment statement of local drug/alcohol usage and prevalence.

b. List of attendees.

/s/
L. J. MUNNS

Distribution:

NASWHIDBEYINST 5215.2DD (1 copy)
List A(less 5,13),B(less 7,8),
D2,7,10,12,15,21

Copy to:

Oak Harbor Police Department
Island County Sheriff
Washington State Patrol
Alcohol Rehabilitation Detachment,
Bremerton

QUARTERLY DATA REPORTING RESPONSIBILITIES

BASE SECURITY:

- a. Number of DUI/DWI cases on/off base since the last meeting/quarter.
- b. Number of drug and alcohol related incidents (other than DUI/DWI) since the last meeting/quarter.
- c. Number of drug and alcohol Incident Complaint Reports (ICR) generated since the last meeting/quarter.
- d. Comparison of above information with same time frame last year.
- e. Number of gate searches conducted since last meeting/quarter and the result of those searches.
- f. Number of barracks/work center searches involving drug dogs conducted since the last meeting/quarter and the results of those searches.
- g. Significant substance abuse trends detected or noted.

BASE LEGAL:

- a. Number of administrative separations or courts-martial involving alcohol and other drugs since the last meeting/quarter.
- b. Comparison of information with the same time frame one year ago.
- c. Listing of "off limits" establishments with known alcohol and/or drug problems or connections.

LOCAL LAW ENFORCEMENT REPRESENTATIVE (Sheriff, City Police, Washington State Patrol):

- a. Listing of incidents involving military personnel detained/involved in "courtesy turnovers" since the last meeting/quarter. The listing should be broken down by name, social security number, rank/rate, command, etc.
- b. Significant problems noted in the local community involving military personnel and alcohol/other drugs.

FAMILY ADVOCACY/FAMILY SERVICE CENTER:

a. Number of new cases since last meeting/quarter involving alcohol/other drugs.

b. Number of referrals made to ATP or local DAPA for suspected alcohol/other drug abuse problems.

c. Comparison of the above information with the same time frame one year ago.

MORALE, WELFARE AND RECREATION:

a. Ongoing "de-glamorization efforts."

(1) Designated Driver program and policies in effect.

(2) Server training programs and policies in effect.

(a) Total number of servers employed base wide.

(b) Number of currently trained with approved curriculum.

(c) Number needing training/scheduled to attend.

(d) Projected training dates for next server training session.

b. Trends and problems noted in clubs due to alcohol, i.e., fights, altercations, under age drinking, etc.

c. Ongoing efforts to limit under age drinking, i.e., positive identification checks (arm bands, hand stamps, etc.).

CHAPLAIN:

a. Number of cases/referrals involving alcohol/drugs since last meeting/quarter.

b. Comparisons and trends from one year ago.

c. Significant trends noted/detected.

INTENSIVE OUTPATIENT TREATMENT REPRESENTATIVE (From ARC or ARD):

a. Number of patients admitted from local area commands for alcohol and/or drug dependency since last meeting/quarter.

b. Comparison of admission rates with one year ago.

- c. Significant substance use/abuse trends noted.
- d. Number of beds currently available or backlog for IOP admission.

NAVAL INVESTIGATIVE SERVICE:

- a. Significant substance abuse trends noted in ongoing or completed investigations.
- b. Listing of local establishments with alcohol/drug abuse "reputations."
- c. Extent of alcohol involvement in NIS investigations.

ATP/PREVENT DIRECTOR:

- a. Number of drug and alcohol screens conducted since last meeting/quarter. (Should be broken down into separate "alcohol" and "drug" categories.)
- b. Number of outpatient and intensive outpatient recommendations since the last meeting/quarter and significant trends noted, i.e., "60% increase in intensive outpatient recommendations over this time last year" and the significance, i.e., "Appears that local commands are not practicing early intervention and waiting too late to refer personnel for assistance."
- c. Number of PREVENT classes convened since the last meeting/quarter, by command.
- d. Number of PREVENT graduates in both prevention and intervention categories since the last meeting/quarter, by command and by separate alcohol and drug categories for incident personnel.
- e. Significant substance abuse trends noted.
- f. Comparison of all information to the same time frame a year ago.
- g. Comparison of security incident information with ATP screening records, i.e., how many persons involved in drug/alcohol related incidents (as documented by security) have been screened? Which ones have not? What commands are they from?

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h. Attendance statistics from monthly/quarterly DAPA meetings, i.e., which commands are not routinely represented at DAPA meetings?

i. PREVENT classes scheduled for the next quarter.